

February 1, 2005
Montana Medicaid Notice
Hospital Outpatient Providers

Obstetric Observation Billing

Qualifying obstetric observation hours are set at 1 hour to 48 hours

1. Billing for an ED, Clinic or Critical Care Admit for Obstetric Observation qualifying conditions.

- **DO NOT bill using G0244.** We use Medicare's OCE. Unfortunately it does not recognize obstetric observation and overrides Medicaid coding. We have had to work around this issue and have been able to resolve it by not using G0244 for a qualifying admit from the ED, Clinic or Critical Care units.
- You must bill Revenue Code 762 using 99234, 99235 or 99236.
Bill the number of units (hours) and charges on this line
- Required diagnosis are:

640.00, 640.03, 640.80, 640.83, 640.90, 640.93, 644.00, 644.03, 644.10, 644.13, 630.00, 631.00, 641.03, 641.13, 641.23, 641.30, 641.33, 641.83, 641.93, 642.03, 642.13, 642.23, 642.33, 642.43, 642.50, 642.53, 642.60, 642.63, 642.70, 642.73, 642.93, 643.00, 643.03, 643.10, 643.13, 643.20, 643.23, 643.80, 643.83, 643.90, 643.93, 644.20, 645.13, 645.23, 646.03, 646.10, 646.13, 646.20, 646.23, 646.33, 646.43, 646.53, 646.60, 646.63, 646.70, 646.73, 646.80, 646.83, 646.93, 647.03, 647.13, 647.23, 647.33, 647.43, 647.53, 647.63, 647.83, 647.93, 648.03, 648.13, 648.23, 648.33, 648.43, 648.53, 648.63, 648.73, 648.83, 648.93, 651.03, 651.13, 651.23, 651.33, 651.43, 651.53, 651.63, 651.83, 651.93, 652.03, 652.13, 652.23, 652.33, 652.43, 652.53, 652.63, 652.73, 652.83, 652.93, 653.03, 653.13, 653.23, 653.33, 653.43, 653.53, 653.63, 653.73, 653.83, 653.93, 654.03, 654.13, 654.23, 654.33, 654.43, 654.53, 654.63, 654.73, 654.83, 654.93, 655.03, 655.13, 655.23, 655.33, 655.43, 655.53, 655.63, 655.73, 655.83, 655.93, 656.03, 656.13, 656.23, 656.33, 656.43, 656.53, 656.63, 656.73, 656.83, 656.93, 657.03, 658.03, 658.13, 658.23, 658.33, 658.43, 658.83, 658.93, 659.03, 659.13, 659.23, 659.33, 659.43, 659.53, 659.63, 659.73, 659.83, 659.93, 660.03, 660.13, 660.23, 660.33, 660.43, 660.53, 660.63, 660.73, 660.83, 660.93, 661.03, 661.13, 661.23, 661.33, 661.43, 661.93, 662.03, 662.13, 662.23, 662.33, 663.03, 663.13, 663.23, 663.33, 663.43, 663.53, 663.63, 663.83, 663.93, 665.03, 665.83, 665.93, 668.03, 668.13, 668.23, 668.83, 668.93, 669.03, 669.13, 669.23, 669.43, 669.83, 669.93, 671.03, 671.13, 671.23, 671.33, 671.53, 671.83, 671.93, 673.03, 673.13, 673.23, 673.33, 673.83, 674.03, 675.03, 675.13, 675.23, 675.83, 675.93, 676.03, 676.13, 676.23, 676.33, 676.43, 676.53, 676.63, 676.83, 676.93, 792.3, 796.5, V28.0, V28.1, V28.2, V61.6

Billing for Direct Admit for Obstetric Observation qualifying conditions.

- **DO NOT bill using G0244.** We use Medicare's OCE. Unfortunately it does not recognize obstetric observation and overrides Medicaid coding. We have had to work around this issue and have been able to resolve it by not using G0244 for a qualifying direct admit.
- You must bill Revenue code 762 with G0263
Bill one unit, charges are necessary on this line
- You must bill Revenue Code 762 using 99234, 99235 or 99236.
Bill the number of units (hours) and charges on this line

Because the claims have code G0244, we are unable to do a mass adjustment. If you have qualifying obstetric claims that have been denied because of G0244, you may submit adjusted claims if the first date of service is within 365 days.

If you have claims starting from date of service 8/1/03 that have been denied because of G0244 on qualifying obstetric services, you may submit the corrected claims to:

Rena Steyaert
Claims Resolution Officer
P O Box 202951
Helena, MT 59620-2951

The only claims past the 365-day filing limit that may be submitted are obstetric observation claims with code G0244.

Contact Information

For claims questions or additional information, contact Provider Relations:

Provider Relations in Helena and out-of-state: (406) 442-1837

In-state toll-free: 1-800-624-3958

Visit the Provider Information website:

<http://www.mtmedicaid.org>